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	RELATED NCCHC/ACA STANDARDS: P-D-05/4-4548, 4-4351, 4-4414	
CHAPTER: 11 HEALTH SERVICES	SUBJECT: SPECIALIZED MENTAL HEALTH CARE	
APPROVED BY THE COMMISSIONER:		
EFFECTIVE DATE: 11-19-07		

PURPOSE:

Higher-level mental health services will be available.

POLICY:

1. Mental Health staff will assist in transfer to an inpatient psychiatric setting whenever an inmate presents a danger to self or others due to acute psychosis or other psychiatric difficulties, which cannot be treated effectively within the correctional institution. Involuntary transfer of these inmates will be completed, taking into consideration due process procedures. An order by a judge will be obtained prior to transfer.
2. Referral of an inmate for psychiatric evaluation.
 - I. When a mental health professional considers an inmate to require psychiatric care beyond the range of services available in the institution, the psychiatrist will be consulted.
 - II. Request for psychiatric evaluation will be documented in inmate's medical record indicating the following:
 - A. Inmate's current mental status.
 - B. Course of treatment/treatment compliance.
 - C. Inmate's behavior reflecting need for inpatient treatment.
 - D. Contraindications of less restrictive treatment options.

E.

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III. Mental health professional will ensure that inmate is placed in a setting appropriate to his/her behavior pending psychiatric evaluation.

IV. A summary of the request will accompany the inmate if sent off-site and there is no access to the medical record.

3. Psychiatric evaluation.

I. Inmates referred for psychiatric evaluation will be interviewed in a timely manner.

II. The psychiatric report will include, but not be limited to:

A. Inmate's behavior/mental status.

B. Evaluation of potential for violence.

C. Current medication.

D. Provisional diagnosis.

E. Length of current illness.

F. Therapeutic measures used.

G. Pertinent historical information.

H. Recommendation regarding transfer to inpatient psychiatric setting.

III. The final decision of whether or not to recommend transfer is the responsibility of the psychiatrist.

IV. Psychiatric evaluation and decision will be documented in inmate's medical record.

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4. When psychiatric decision indicates that transfer is appropriate, the mental health professional will complete documentation needed to initiate voluntary or involuntary transfer and coordinate transfer process with institutional staff. The involuntary admission process is coordinated as needed.

Mental health professional will notify appropriate institutional staff when transfer has been authorized.

5. Pending transfer, the inmate will be monitored daily by psychiatrist, mental health professional and nursing/medical staff. Documentation of daily monitoring will be noted in inmate's medical record.
6. If indicated by the psychiatrist, admission to an acute care facility will be considered of immediate stabilization is needed.
7. Confidentiality of health information is maintained during transfer to the receiving facility.

References:

National Commission on Correctional Health Care: Standards for Health Services in Prisons, 2003, P-D-05

American Correctional Association: Standards for Adult Correctional Institutions, 4th Edition, 2003, 4-4348, 4-4351,4-4414.